FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all 1A ETHICS AND statements and reports filed by all committees for state office must be filed AMPAIGN DISCLOSURE BD.

electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

2012 MAY 18 AM 9: 07

COMMITTEE NAME (Must be same as on State	ement of Organization)		
Loutsch for Sune	rvisor	FORM	
IMPORTANT: Indicate by # type of committee you are		DR-2 DISCLOSURE	
(1) Statewide/Legislative/Judge Standing for Retention	n Candidate (2)State PAC (3)State Party (6)City Candidate (7)School Board or Other Political	(Rev. 12/2009) REPORT	
Subdivision Candidate (8) County PAC (9) City PAC	(10) School Board or Other Political Subdivision PAC (For Office Use Only	
11) Local Ballot Issue	Comm. # Di		
CANDIDATE COMMITTEES ONLY: Candidate Name	Political Party (if applicable)	Logged In BW	
mank loutsch	Republican		
Office Sought	1	Computer	
County Supervisor	District (if Senate or House)	Addited	
Late reports are subject to possible civil and criminal	penalties. Pursuant to Iowa Code sections 68B.32A(7) an	d 68A.401(3), the candidate, for a	
candidate's committee, and the chairperson, for any o	other type of committee, is the individual responsible for fi	ling timely and accurate reports.	
Pia & t			
nou a. Tough	712-786-1439 TELEPHONE	5-15-12	
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	DATE SIGNED	
m - 19		Participation of the second process of the process of the second	
I AM FILING AMay 19	REPORT FOR (1) ELECTION /(2)N		
(report date)	Indicate by # /		
☐CHECK IF AMENDMENT TO REPORT DATE	D Local	Committees, enter Date of Election	
		Tune 5, 2012	
Check if this is final (termination) report and att (You must continue to file reports until a	DD 2 in filed \	ty & Local Committees, enter County in	
,	which	Election is held	
STATEMENT OF CASH	ON HAND		
CASH ON HAND at the beginning of the reporting			
committee. This amount MUST be the soft the last reporting period or must be ze	same as the cash on hand at the end ero if this is first report filed.)	300,	
ADD TOTAL MONEY TAKEN IN THIS I			
	Attach Schedule A) (*also see in-kind below)	150.	
	ch Schedule F)		
	or correduct /		
occieding a colai sales of Campaign F	Property (Attach Schedule H)		
	Property (Attach Schedule H)		
(Schedule H applies to Candid	dates' Committees Only)	0.	
(Schedule H applies to Candid	dates' Committees Only) SUB-TOTAL	0.	
(Schedule H applies to Candid	SUB-TOTAL	\$ 450.	
SUBTRACT TOTAL MONEY SPENT TO Schedule B: Expenditures total (Attach	SUB-TOTAL HIS PERIOD Schedule B) (**also see debts and loans below)	s 450.	
SUBTRACT TOTAL MONEY SPENT TO Schedule B: Expenditures total (Attach Schedule F: Loan Repayments total (Att	SUB-TOTAL HIS PERIOD Schedule B) (**also see debts and loans below)tach Schedule F)	450. 0.	
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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A MONETARY
RECEIPTS

CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME	(Must be sai	me as on State	ement of Organization)	
Loutsch	For	Super	visor	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	13) Adlerila			
3/21/12	CK#	Mark L. Bohner Lemans SE STO31 Craig Anderson 24909 Jade Ave. Dernill, Fa. 51038	NA	\$ 50.	L
	ID#	() () () () () ()			
3/27/12	CK#	2499 Jade Ave.	NA	100.	<u> </u>
112	ID#				
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	ID#				
	CK#				
			SUB-TOTAL	. 151	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A)